



DOVER EMPLOYEE VERIFICATION FORM

SECTION A Dover employee (parent, stepparent or legal guardian of the applicant) is to complete this section and submit completed form to his/her Human Resource Department for verification. Spouses of employees are not eligible to apply.

Applicant Name	Applicant Email
----------------	-----------------

Employee Name	Employee Phone Number	Employee Email
---------------	-----------------------	----------------

Relationship to Applicant: Parent Stepparent* Legal Guardian*

*If the relationship is that of stepparent or legal guardian, the applicant must reside with the qualifying employee on a full-time basis.

----- **APPLICANT: DO NOT WRITE BELOW THIS LINE** -----

SECTION B Employee's Local Human Resource Department is to complete this section.

Please verify that the above named employee is currently working as a full-time employee of Dover Corporation or one of its operating companies with at least one year of continuous service in the previous five years. Further inquiry may be made after the application deadline to verify that the employee is still a full-time employee and has been employed for one year of continuous service as of the application deadline, February 23, 2026.

Position Held	HR Central Employee ID#	Date of Hire
---------------	-------------------------	--------------

I verify that the above information is correct and that the applicant is qualified to compete for the Dover Scholars Program based on this information.

Print Name of Person Approving Eligibility	Title	Phone Number
--	-------	--------------

Signature of Person Approving Eligibility	Date Approved	Email
---	---------------	-------

Dover Operating Company	City	State	Country
-------------------------	------	-------	---------

Completed form should be submitted by February 23, 2026 to:

**Dover Scholars Program
PO Box 648
Naperville, IL 60566
Fax: 630-428-2695
Email: info@doverfoundation.org**